Chapter you are filing under:		
☐ Chapter 7		
☐ Chapter 11		
☐ Chapter 12		
■ Chapter 13		Check if this an amender filing
	☐ Chapter 7 ☐ Chapter 11 ☐ Chapter 12	☐ Chapter 7 ☐ Chapter 11 ☐ Chapter 12

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):):
1.	Your full name			
	Write the name that is on	Corina		
	your government-issued picture identification (for	First name	First name	
	example, your driver's	Yvette		
	license or passport).	Middle name	Middle name	
	Bring your picture	Ybarra		
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)	
2.	All other names you have used in the last 8 years			
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-1113		

Debtor 1 Ybarra, Corina Yvette

Case number (if known)

		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s)		☐ I have not used any business name or EINs. Business name(s)			
		EINs	•	EINs			
5.	Where you live	1132 Acacia Ave		If Debtor 2 lives at a different address:			
		Number, Street, City, State & ZIP Code Kern		Number, Street, City, State & ZIP Code			
		County		County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.		If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code		Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)		Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)			

Debtor 1 Ybarra, Corina Yvette					Case number (if known)				
Par	t 2: Tell the Court About	Your Bankruptcy Ca	ase						
7.	The chapter of the Bankruptcy Code you are		brief description of each, s the top of page 1 and chec		1 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Fo	rm			
	choosing to file under	☐ Chapter 7							
		☐ Chapter 11							
		☐ Chapter 12							
		Chapter 13							
8.	How you will pay the fee	about how yo	ou may pay. Typically, if yo	u are paying the fee your	with the clerk's office in your local court for more details self, you may pay with cash, cashier's check, or money or attorney may pay with a credit card or check with a	der.			
		•	-printed address.						
			y the fee in installments Installments (Official Form		n, sign and attach the Application for Individuals to Pay Th	ie			
		not required your family s	to, waive your fee, and magize and you are unable to p	y do so only if your incon pay the fee in installment	only if you are filing for Chapter 7. By law, a judge may, be is less than 150% of the official poverty line that applies s). If you choose this option, you must fill out the <i>Application</i> and file it with your petition.	to			
9.	Have you filed for	= N.	-						
٠.	bankruptcy within the last								
	8 years?	☐ Yes.							
		District		When	Case number				
		District		When	Case number				
		District		When	Case number				
10.	Are any bankruptcy cases pending or being filed by	■ No							
	a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.							
		Debtor			Relationship to you				
		District		When	Case number, if known				
		Debtor			Relationship to you				
		District		When	Case number, if known				
11.		■ No. Go to	line 12.						
	residence?	☐ Yes. Has y	our landlord obtained an e	eviction judgment agains	st you?				
			No. Go to line 12.						
			Yes. Fill out <i>Initial Stater</i> bankruptcy petition.	nent About an Eviction J	ludgment Against You (Form 101A) and file it as part of th	S			

Deb	otor 1 Ybarra, Corina Yv	ette			Case number (if known)		
Par	Report About Any Bu	sinesses \	ou Own	as a Sole Proprieto	or		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Go to Part 4.			
		☐ Yes.	Name	and location of bus	siness		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			of business, if any			
	If you have more than one sole proprietorship, use a separate sheet and attach it		Numb	Number, Street, City, State & ZIP Code			
	to this petition.		Check	the appropriate box	x to describe your business:		
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))		
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))		
				Stockbroker (as de	efined in 11 U.S.C. § 101(53A))		
				Commodity Broker	r (as defined in 11 U.S.C. § 101(6))		
				None of the above			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines	. If you inc s, cash-flo	licate that you are a	sourt must know whether you are a small business debtor so that it can set appropriate small business debtor, you must attach your most recent balance sheet, statement of deral income tax return or if any of these documents do not exist, follow the procedure in 11		
	For a definition of small	■ No.	I am n	ot filing under Chap	oter 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fi Code.	ling under Chapter	11, but I am NOT a small business debtor according to the definition in the Bankruptcy		
		☐ Yes.	I am fi	ling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Par	t 4: Report if You Own or	Have Any	Hazardoı	ıs Property or Any	Property That Needs Immediate Attention		
14.	Do you own or have any property that poses or is	■ No.					
	alleged to pose a threat of imminent and identifiable	☐ Yes.	What is t	he hazard?			
	hazard to public health or safety? Or do you own any property that needs immediate attention?			iate attention is why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?			
					Number, Street, City, State & Zip Code		

Debtor 1 Ybarra, Corina Yvette

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again. **About Debtor 1:**

You must check one:

I received a briefing from an approved credit

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	otor 1 Ybarra, Corina Yv	ette	Case number (if known)					
Par	t 6: Answer These Question	ons for Repo	orting Purposes					
16.	What kind of debts do you have?		16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C.§ 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."					
			Yes. Go to line 17.					
			Are your debts primarily busine or a business or investment or thro					
			☐ No. Go to line 16c.					
			Yes. Go to line 17.					
		16c. S	State the type of debts you owe that	at are not consume	debts or business deb	ots		
17.	Are you filing under Chapter 7?	■ No.	am not filing under Chapter 7. Go	o to line 18.				
	Do you estimate that after any exempt property is excluded and		I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?					
	administrative expenses are paid that funds will be		□ No					
	available for distribution to unsecured creditors?	Γ	Yes					
18.	How many Creditors do	■ 1-49		1 ,000-5,000		☐ 25,001-50,000		
	you estimate that you owe?	□ 50-99		☐ 5001-10,000		50,001-100,000		
		□ 100-199 □ 200-999		□ 10,001-25,00	00	☐ More than100,000		
19.	How much do you	□ \$0 - \$50),000	□ \$1,000,001 -	\$10 million	☐ \$500,000,001 - \$1 billion		
	estimate your assets to be worth?		- \$100,000	□ \$10,000,001 □ \$50,000,001		□ \$1,000,000,001 - \$10 billion		
			1 - \$500,000 1 - \$1 million	□ \$50,000,001 □ \$100,000,00		☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
20.	How much do you	□ \$0 - \$50	0,000	□ \$1,000,001 -	\$10 million	☐ \$500,000,001 - \$1 billion		
	estimate your liabilities to be?		1 - \$100,000	□ \$10,000,001		□ \$1,000,000,001 - \$10 billion		
			1 - \$500,000 1 - \$1 million	□ \$50,000,001 □ \$100,000,00	·	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
		— \$300,00	TI - QT TIIIIIOTT			***************************************		
Par	t7: Sign Below							
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.						
			osen to file under Chapter 7, I am e. I understand the relief available			nder Chapter 7, 11,12, or 13 of title 11, United eed under Chapter 7.		
			ey represents me and I did not pay ed and read the notice required by			ttorney to help me fill out this document, I		
		I request re	elief in accordance with the chapte	er of title 11, United	d States Code, specifi	ed in this petition.		
		case can re				perty by fraud in connection with a bankruptcy U.S.C. §§ 152, 1341, 1519, and 3571.		
			vette Ybarra		Signature of Debtor 2			
		Executed or			Executed on			
			MM / DD / YYYY	<u></u>	MM /	DD / YYYY		

Debtor 1 Ybarra, Corina Yvette Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Phillip W. Gillet Jr.	Date	January 24, 2018
Signature of Attorney for Debtor		MM / DD / YYYY
Phillip W. Gillet Jr. ~214914		
Printed name		
Phillip Gillet, Jr. Attorney at Law		
Firm name		
1705 27th St		
Bakersfield, CA 93301-2807		
Number, Street, City, State & ZIP Code		
Contact phone (661) 323-3200	Email address	lawyer@bak.rr.com
214914		
Bar number & State		

01/24/2018 02:02 PM PST TO:16613233078 FROM:5178612042 Page: 2

Certificate Number: 16199-CAE-CC-030474122

Doc 1



16199-CAE-CC-030474122

CERTIFICATE OF COUNSELING

I CERTIFY that on <u>January 24, 2018</u>, at <u>5:00</u> o'clock <u>PM EST</u>, <u>Corina Yvette Ybarra</u> received from <u>CC Advising</u>, <u>Inc.</u>, an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the <u>Eastern District of California</u>, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: January 24, 2018 By: /s/Mark Wilson for Julia Trinidad

Name: Julia Trinidad

Title: Credit Counselor

^{*} Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

01	./24/18				Case 18-10212				
Fill	in this informa	tion to identify	your case and thi	s filing	:				
Deb	otor 1	Corina Yvet							
Deb	otor 2	First Name	Middle	Name	Last Name	ĺ			
	ouse, if filing)	First Name	Middle	Name	Last Name				
Uni	ted States Bank	ruptcy Court for	the: EASTERN	DISTR	ICT OF CALIFORNIA, FRESNO DIVISION	١			
Cas	se number								Check if this is an amended filing
So In ea think	k it fits best. Be a mation. If more s	A/B: Plarately list and discomplete and a pace is needed,	roperty escribe items. List a	e. If two	only once. If an asset fits in more than one married people are filing together, both are on his form. On the top of any additional pages,	equally respo	nsible for sup	plying	correct
	wer every questio		717		Face Van Orania and American				
Pari					Estate You Own or Have an Interest In				
	_		juitable interest in a	ny resid	ence, building, land, or similar property?				
_	No. Go to Part 2.								
	Yes. Where is the	ne property?							
1.1				Wha	t is the property? Check all that apply				
	1132 Acacia	a Ave			Single-family home		duct secured claims or exemptions. Put nt of any secured claims on Schedule D:		
		vailable, or other des	scription		Condominium or aconorativo		tho Have Claims Secured by Property.		
					·				
	Bakersfield	CA	93305-1206			Current va			ent value of the on you own?
	City	State	ZIP Code		Investment property		1,480.00		\$201,480.00
									nership interest the entireties, or
				Who	has an interest in the property? Check one	a life estate	e), if known.	oy 10 ₃	, the enth enter, en
	Kern				Debtor 1 only Debtor 2 only	Fee Sim	pie		
	County				Debtor 1 and Debtor 2 only	☐ Check	if this is com	munity	property
				Othe	At least one of the debtors and another information you wish to add about this iter	`	tructions)		
					erty identification number:	, 54511 45 100			
					nary residence ir market value \$219,000.00 minus	8% cost o	f sale = \$2	01,48	0.00)
				-					

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

\$201,480.00

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages

you have attached for Part 1. Write that number here.....=>

Part 2: Describe Your Vehicles

De	ebtor 1 Y	barra, Cori	na Yvette		Case number (if known)	
3. (Cars, vans,	trucks, tract	ors, sport utility veh	nicles, motorcycles		
	□No					
ı	Yes					
3.	.1 Make:	Toyota		Who has an interest in the property? Check one		ured claims or exemptions. Put secured claims on Schedule D:
	Model:	Camry		Debtor 1 only	Creditors Who Hav	re Claims Secured by Property.
	Year:	2009		Debtor 2 only	Current value of t	
		nate mileage: formation:	136524	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Otherini	omation.		☐ At least one of the debtors and another		
				☐ Check if this is community property (see instructions)	\$5,700	.00 \$5,700.00
5	■ No □ Yes Add the do	ollar value of	the portion you owr	ercraft, fishing vessels, snowmobiles, motorcycle n for all of your entries from Part 2, including mber here	g any entries for pages	\$5,700.00
Pa	rt 3: Descri	he Your Perso	nal and Household Ite	ems		
				erest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
			ces, furniture, linens, o	china, kitchenware ds and furnishings		\$500.00
_			Tiouseriola goo	us and runnishings		
		Televisions ar including cell	nd radios; audio, video phones, cameras, m	o, stereo, and digital equipment; computers, print edia players, games	ers, scanners; music collec	tions; electronic devices
_			Liectionics			Ψοσοίσο
		Antiques and collections, m	figurines; paintings, p nemorabilia, collectibl	rints, or other artwork; books, pictures, or other les	art objects; stamp, coin, or b	paseball card collections; other
	Examples:	for sports ar Sports, photog instruments		other hobby equipment; bicycles, pool tables, g	olf clubs, skis; canoes and k	ayaks; carpentry tools; musical
	☐ Yes. De	scribe				
	Firearms Examples	: Pistols, rifles	s, shotguns, ammuniti	ion, and related equipment		
	Yes. De	scribe				
			9MM Smith and	Wesson Shield		\$200.00

De	ebtor 1	Ybarra, Co	orina Yvet	te		Case number (if known)	
11.	Clothes	s					
			clothes, furs	, leather coats, designer v	wear, shoes, accessories		
		Describe					
	_ 100.	D00011D0	Clothi	ng			\$150.00
12	Jewelry	,					
12.	Examp		jewelry, cost	ume jewelry, engagement	rings, wedding rings, heirlooi	m jewelry, watches, gems, gold, s	silver
	■ No	December					
	⊔ Yes.	Describe					
13.		rm animals oles: Dogs, cats	s. birds. hors	ses			
	■ No		-,,				
	☐ Yes.	Describe					
14.	Any oth	her personal a	and househ	old items you did not a	Iready list, including any he	ealth aids you did not list	
	■ No						
	☐ Yes.	Give specific i	nformation				
15	Add t	he dollar valu	e of all of v	our entries from Part 3	including any entries for n	pages you have attached for	
10			-	·		ages you have attached for	\$1,650.00
						L	
		scribe Your Fin					
Do	you ow	vn or have any	/ legal or ed	quitable interest in any	of the following?		Current value of the portion you own?
							Do not deduct secured claims or exemptions.
	□ No		-	ır wallet, in your home, in		and when you file your petition Cash on hand	\$10.00
_						Odon on nand	Ψ10.00
					certificates of deposit; shares the same institution, list eac	in credit unions, brokerage hous h.	es, and other similar
	Yes				Institution name:		
			17.1.	Checking Account	Kern Schools Federa	Il Credit Union acct.	\$10.00
18.				y traded stocks nt accounts with brokerag	je firms, money market accou	nts	
	■ No		•	J	,		
	☐ Yes			Institution or issuer name	e:		
19.	•	ublicly traded enture	stock and i	nterests in incorporated	d and unincorporated busir	nesses, including an interest in	an LLC, partnership, and
	■ No						
	☐ Yes.	Give specific		about them ne of entity:		% of ownership:	
20	Govern	nment and cor		•	e and non-negotiable instru	·	
∠∪.	Negoti Non-ne	iable instrumen	ts include pe	ersonal checks, cashiers'	checks, promissory notes, and co someone by signing or deliv	nd money orders.	
	■ No	Give specific ir	oformation o	hout them			
	_ 165.	OINC Shacille II	auui a	JOGE WICHT			

De	btor 1	Ybarra, Corina Y	vette		Case number (if known)	
			Issuer name:		_	
21.		nent or pension accordes: Interests in IRA, E		403(b), thrift savings accounts, or other per	nsion or profit-sharing plar	ns
ı	No					
I	☐ Yes. L	ist each account sepa. Ty	rately. pe of account:	Institution name:		
22.	Your sh		sits you have made so	that you may continue service or use from a public utilities (electric, gas, water), telecomr		others
	■ No □ Yes			Institution name or individual:		
	Annuitie ■ No	es (A contract for a per	riodic payment of mone	y to you, either for life or for a number of yea	ırs)	
ı	☐ Yes	Issuer r	name and description.			
		s in an education IRA C. §§ 530(b)(1), 529A(b		ualified ABLE program, or under a qualif	ied state tuition progran	n.
	☐ Yes	Institution	on name and description	n. Separately file the records of any interests	s.11 U.S.C. § 521(c):	
	Trusts, ■ No	equitable or future ir	nterests in property (o	ther than anything listed in line 1), and r	rights or powers exercis	able for your benefit
I	☐ Yes.	Give specific informat	ion about them			
	Examp			nd other intellectual property ds from royalties and licensing agreements		
	■ No □ Yes.	Give specific informat	ion about them			
27.			ther general intangible exclusive licenses, coope	es erative association holdings, liquor licenses,	professional licenses	
	■ No □ Yes.	Give specific informat	ion about them			
						Ourment cooks of the
IVIO	ney or p	property owed to you	1?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refu	unds owed to you				
	□ No					
	Yes. 0	Give specific information	on about them, including	whether you already filed the returns and th	ne tax years	
			Anticipa	ated 2017 refund	Federal	\$1,000.00
					7	
			Anticipa	ated 2017 refund	State	\$1,202.00
29.		support les: Past due or lump :	sum alimony, spousal s	support, child support, maintenance, divorc	e settlement, property set	tlement
	■ No					
ı	⊔ Yes. (Give specific information	on			
	Examp			nts, disability benefits, sick pay, vacation pa	y, workers' compensation	, Social Security benefits;
	■ No □ Yes. •	Give specific information	on			

Deb	otor 1	Ybarra, Corina Yvette	Case number (if known)	
_		s in insurance policies les: Health, disability, or life insurance; health savings account (H	SA); credit, homeowner's, or renter's insurance	
		Name the insurance company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
_		erest in property that is due you from someone who has die re the beneficiary of a living trust, expect proceeds from a life insu		property because someone has
_		Give specific information		
•	Examp ■ No	against third parties, whether or not you have filed a lawsuites: Accidents, employment disputes, insurance claims, or rights		
		ontingent and unliquidated claims of every nature, including	g counterclaims of the debtor and rights to s	et off claims
	■ No □ Yes.	Describe each claim		
	No	ancial assets you did not already list Give specific information		
36.		ne dollar value of all of your entries from Part 4, including ar . Write that number here		\$2,222.00
Part	: 5: Des	scribe Any Business-Related Property You Own or Have an Interest	In. List any real estate in Part 1.	
37. [Oo you o	wn or have any legal or equitable interest in any business-related p	roperty?	
_		to Part 6.		
L	l Yes. G	o to line 38.		
Part		scribe Any Farm- and Commercial Fishing-Related Property You Ow ou own or have an interest in farmland, list it in Part 1.	n or Have an Interest In.	
46.		own or have any legal or equitable interest in any farm- or o	commercial fishing-related property?	
	_	Go to line 47.		
Part	7:	Describe All Property You Own or Have an Interest in That You Di	d Not List Above	
_	Examp	have other property of any kind you did not already list? les: Season tickets, country club membership		
	■ No □ Yes. (Give specific information		
54.	Add t	ne dollar value of all of your entries from Part 7. Write that n	umber here	\$0.00

Debtor 1 Case number (if known) Ybarra, Corina Yvette List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$201,480.00 56. Part 2: Total vehicles, line 5 \$5,700.00 57. Part 3: Total personal and household items, line 15 \$1,650.00 58. Part 4: Total financial assets, line 36 \$2,222.00 Part 5: Total business-related property, line 45 59. \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$9,572.00 Copy personal property total \$9,572.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$211,052.00

Fill in this inform	mation to identify your	case:			
Debtor 1	Corina Yvette Yb	arra			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F CALIFORNIA, FRESNO	DIVISION	
Case number (if known)					☐ Check if this is an amended filing
					amended ming

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	the Pro	perty Y	∕ou Claim	as Exemp
---------	----------	---------	---------	-----------	----------

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Copy the value from Check only one box	x for each exemption.
Schedule A/B	
Dakoronola Ork, 00000 1200	CCCP § 703.140(b)(5) market value, up to ble statutory limit
	CCCP § 703.140(b)(3) The market value, up to ble statutory limit
	CCCP § 703.140(b)(3) market value, up to ble statutory limit
	CCCP § 703.140(b)(3) The market value, up to ble statutory limit
	CCCP § 703.140(b)(3) The market value, up to ble statutory limit

	ef description of the property and line on hedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption.	
	nticipated 2017 refund	\$1,000.00		CCCP § 703.140(b)(5)
Lir	e from Schedule A/B. 28.1		■ 100% of fair market value, up to any applicable statutory limit	
	nticipated 2017 refund	\$1,202.00		CCCP § 703.140(b)(5)
Lir	e from Schedule A/B: 28.2		■ 100% of fair market value, up to any applicable statutory limit	
	e you claiming a homestead exemption oubject to adjustment on 4/01/19 and every 3 y			
	Yes. Did you acquire the property covered	by the exemption within	1,215 days before you filed this case?	
	□ No			
	☐ Yes			

Fill in this information to identify you	ur case:			
Debtor 1 Corina Yvette	Ybarra			
First Name	Middle Name Last Name		1	
Debtor 2 (Spouse if, filing) First Name	Middle Name Last Name			
(Opouse II, IIIIIg)	Wilder Name			
United States Bankruptcy Court for the	EASTERN DISTRICT OF CALIFORNIA, FF	RESNO DIVISION	_	
Case number				
(if known)			☐ Check	if this is an
			amend	led filing
000 1 1 5 1000				
Official Form 106D				
Schedule D: Creditors	s Who Have Claims Secure	ed by Propert	У	12/15
	If two married people are filing together, both are e it, number the entries, and attach it to this form. On			
1. Do any creditors have claims secured b	y your property?			
☐ No. Check this box and submit the	nis form to the court with your other schedules. Yo	u have nothing else to re	port on this form.	
Yes. Fill in all of the information be	pelow.			
Part 1: List All Secured Claims				
	more than one secured claim, list the creditor separatel	Column A	Column B	Column C
	s a particular claim, list the other creditors in Part 2. As	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
2.1 Carmax Auto Finance	Describe the property that secures the claim:	value of collateral. \$5,642.00	claim \$5,700.00	If any \$0.00
Creditor's Name	2009 Toyota Camry	Ψο,ο 12.00	<u> </u>	40.00
Attn: Bankruptcy	2000 10,010 00			
Department	As of the date you file, the claim is: Check all that			
PO Box 440609	apply.			
Kennesaw, GA 30160-9511	☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only	☐ An agreement you made (such as mortgage or se	ecured		
☐ Debtor 2 only	car loan)			
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			<u> </u>
community debt				
Date debt was incurred 2012-08	Last 4 digits of account number 8330	<u> </u>		
2.2 Wells Fargo Hm Mortgag	Describe the property that secures the claim:	\$175,457.00	\$201,480.00	\$0.00
Creditor's Name	1132 Acacia Ave, Bakersfield, CA	Ψ175,457.00	Ψ201,400.00	Ψ0.00
	93305-1206			
	Primary residence (Fair market			
	value \$219,000.00 minus 8% cost of			
8480 Stagecoach Cir	sale = \$201,480.00)			
Frederick, MD	As of the date you file, the claim is: Check all that apply.			
21701-4747	Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who owes the debt? Check one.	Disputed			
_	Nature of lien. Check all that apply.			
Debtor 1 only	 An agreement you made (such as mortgage or second car loan) 	ecured		
Debtor 2 only	<u> </u>			
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit			
Check if this claim relates to a	☐ Other (including a right to offset)			
	5or (morading a right to onsor)			

community debt

Debtor 1	Corina Yv	ette Ybarra			Case number (f know)	
	First Name	Middle Name	Last Name			
Date debt	was incurred	2006-07	Last 4 digits of account number	5306		
Add the d	ollar value of y	our entries in Column A	on this page. Write that number her	e:	\$181,099.00	η
	he last page of number here:	your form, add the dolla	ar value totals from all pages.		\$181,099.00	<u>)</u>

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Fill in this in	formation to identify your o	ase:				
Debtor 1	Corina Yvette Yba	arra				
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
Haller I Otales	Deal marker Occurs (and be	EACTEDN DICTOIC	TOF CALIFORNIA FR	ECNIO DIVICIONI		
United States	Bankruptcy Court for the:	EASTERN DISTRIC	T OF CALIFORNIA, FR	ESINO DIVISION		
Case number	r					
(if known)					_	eck if this is an
					ame	ended filing
Official Fo	orm 106E/F					
	E/F: Creditors W	ho Have Unse	cured Claims			12/15
nny executory Schedule G: Ex D: Creditors W	e and accurate as possible. Use contracts or unexpired leases tecutory Contracts and Unexpi ho Have Claims Secured by Pr on Page to this page. If you have f known).	that could result in a cla red Leases (Official Forr operty. If more space is	im. Also list executory c n 106G). Do not include a needed, copy the Part yo	ontracts on Schedule A/B any creditors with partially u need, fill it out, number	: Property (Official F	orm 106A/B) and on t are listed in Schedule xes on the left. Attach
	st All of Your PRIORITY Un					
	editors have priority unsecured	d claims against you?				
No. Go	to Part 2.					
☐ Yes.						
Part 2: Lis	st All of Your NONPRIORIT	/ Unsecured Claims				
3. Do any cr	editors have nonpriority unsec	ured claims against you	?			
☐ No. Yo	u have nothing to report in this pa	art. Submit this form to the	court with your other sche	dules.		
Yes.						
unsecured	your nonpriority unsecured cla claim, list the creditor separately reditor holds a particular claim, li	for each claim. For each	claim listed, identify what t	pe of claim it is. Do not list	claims already include	ed in Part 1. If more
					1	Total claim
4.1 Ban	k of America	Last 4 di	gits of account number	2803		\$10,017.00
•	riority Creditor's Name			0004.00.40	_	
	-105-03-14 Box 26012	wnen wa	as the debt incurred?	2004-02-16		
	ensboro, NC 27420-6012	2				
Numb	er Street City State Zlp Code	As of the	date you file, the claim	s: Check all that apply		
Who	incurred the debt? Check one.					
■ De	ebtor 1 only	☐ Conti	ngent			
□ De	ebtor 2 only	☐ Unliqu	uidated			
□ De	ebtor 1 and Debtor 2 only	☐ Dispu	ted			
☐ At	least one of the debtors and and	ther Type of I	NONPRIORITY unsecured	d claim:		
□сі	neck if this claim is for a comm	nunity \square Stude	ent loans			
debt Is the	claim subject to offset?		ations arising out of a sepa priority claims	ration agreement or divorce	that you did not	
■ No	-		' '	g plans, and other similar d	ebts	
□Y€			Specify Revolving			

Debto	r 1 Ybarra, Corina Yvette		Case number (if know)	
4.2	California Kaiser Foundation Health Plan	Last 4 digits of account number	001	\$167.80
	Nonpriority Creditor's Name	When was the debt incurred?	Unknown	
	93 E Walnut St Pasadena, CA 91103-3832	_		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Medical se	rvices	
4.3	Capital Accounts	Last 4 digits of account number	5102	\$397.00
	Nonpriority Creditor's Name			Ψοστίου
		When was the debt incurred?	2016-07	
	PO Box 140065 Nashville, TN 37214-0065			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Open acco	unt	
	Carital One	Look & digito of account growther	0.470	\$4.504.00
4.4	Capital One Nonpriority Creditor's Name	Last 4 digits of account number		\$1,521.00
	Attn: General Correspondence/Bankruptcy	When was the debt incurred?	2007-12	
	PO Box 30285 Salt Lake City, UT 84130-0285			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 2 only Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
		Student loans		
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	and the second s	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Revolving	account	

Debto	1 Ybarra, Corina Yvette		Case number (if know)	
4.5	Citibank/the Home Depot	Last 4 digits of account number	3801	\$466.00
	Nonpriority Creditor's Name Citicorp Cr Srvs/Centralized Bankruptcy PO Box 790040 Saint Louis, MO 63179-0040	When was the debt incurred?	2007-08	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed		
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing		
	Yes	Other. Specify Revolving	account	
4.6	Cmre Financial Services Nonpriority Creditor's Name Attn: Bankruptcy	Last 4 digits of account number When was the debt incurred?	<u>6240</u> 2016-09	\$171.00
	3075 E Imperial Hwy Ste 200 Brea, CA 92821-6753	_		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Спеск ан tnat apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	□Yes	Other Specify Open acco		
4.7	Comenity Bank/Victoria Secret Nonpriority Creditor's Name	Last 4 digits of account number	4015	\$796.00
	Attn: Bankruptcy PO Box 182125 Columbus, OH 43218-2125	When was the debt incurred?	2007-12	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	rration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	■ Other Specify Revolving		

Debto	r 1 Ybarra, Corina Yvette		Case number (if know)	
4.8	Credit One Bank NA Nonpriority Creditor's Name	Last 4 digits of account number	3938	\$2,092.00
	Nonphonty Creditor's Name	When was the debt incurred?	2007-11	
	PO Box 98873 Las Vegas, NV 89193-8873 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Revolving	account	
4.9	Credit Protection Assoc/Etan Industries	Last 4 digits of account number	5448	\$219.00
	Nonpriority Creditor's Name			•
	Attn: Bankruptcy PO Box 802068	When was the debt incurred?	2013-09-23	
	Dallas, TX 75380-2068			
	Number Street City State ZIp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	At least one of the debtors and another	Student loans	a ciaiii.	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Open acco	unt	
4.10	San Joaquin Community Hospital Nonpriority Creditor's Name	Last 4 digits of account number	5660	\$250.00
		When was the debt incurred?	Unknown	
	PO Box 846178 Los Angeles, CA 90084-6178			
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	\square Check if this claim is for a community	Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin	a plans, and other similar dobts	
	■ No	·		
	☐ Yes	■ Other. Specify Medical se	rvices	

Debtor 1	Ybarra, C	Corina Yvette		Case	number (if know)		
		ΓV) / Target	Last 4 digits of account number	5531	<u> </u>		\$1,181.00
(Nonpriority Cred C/O Financ Mailstop PO Box 947	ial & Retail Services	When was the debt incurred?	2006	5-02		
1	Number Street	s, MN 55440-9475 City State Zlp Code the debt? Check one.	As of the date you file, the claim	is: Chec	k all that apply		
	Debtor 1 on	lv	☐ Contingent				
_	Debtor 2 onl	•	☐ Unliquidated				
_		d Debtor 2 only	☐ Disputed				
[At least one	of the debtors and another	Type of NONPRIORITY unsecure	ed claim:			
[☐ Check if thi	is claim is for a community	☐ Student loans				
	lebt s the claim su	bject to offset?	☐ Obligations arising out of a sep report as priority claims	aration a	greement or divorce th	hat you did not	
	No		Debts to pension or profit-shar	ing plans,	and other similar deb	ots	
[☐ Yes		■ Other. Specify Revolving	accou	nt		
Part 3:	Liet Other	s to Po Notified About a Do	sht That You Already Listed				
			about your bankruptcy, for a debt that		du listed in Douts 4 a	2 For evennle if a	
is trying have m	to collect fro	m you for a debt you owe to s	someone else, list the original creditor in at you listed in Parts 1 or 2, list the add	n Parts 1	or 2, then list the co	llection agency here.	Similarly, if you
Name and	l Address		On which entry in Part 1 or Part 2 did yo	u list the o	original creditor?		
		Victoria Secret	'		Creditors with Priority	•	
	(659728 tonio TX 7	78265-9728		Part 2:	Creditors with Nonpri	iority Unsecured Claims	
Ouri Air	101110, 17, 1	0200 3720	Last 4 digits of account number	4	015		
Name and		lit Services	On which entry in Part 1 or Part 2 did yo Line 4.5 of (<i>Check one</i>):		original creditor? Creditors with Priority	y Unsecured Claims	
PO Box			I	Part 2:	Creditors with Nonpri	iority Unsecured Claims	
Phoeni	x, AZ 8506	2-8011	Last 4 digits of account number	3	801		
Part 4:	Add the Ar	mounts for Each Type of U	nsecured Claim				
6. Total th	_	certain types of unsecured cl	aims. This information is for statistical	reporting	purposes only. 28 l	U.S.C. §159. Add the a	nounts for each
type or	unscource oid	41111			Total C	Claim	
	6a.	Domestic support obligation	ns	6a.	\$	0.00	
Total clair		Tayon and contain other deb	to you awa the government	Ch			
from Par	rt 1 6b.		ets you owe the government of injury while you were intoxicated	6b. 6c.	\$ 	0.00	
	6d.	•	nsecured claims. Write that amount here.	6d.	\$	0.00	
		,			· ———	<u> </u>	
	6e.	Total Priority. Add lines 6a th	nrough 6d.	6e.	\$	0.00	
					Total C	Claim	
Total clair	6f. ms	Student loans		6f.	\$	0.00	
from Par			separation agreement or divorce that	6-2	\$	0.00	
	6h.	you did not report as priorit Debts to pension or profit-s	y claims haring plans, and other similar debts	6g. 6h.	\$ 	0.00	
	6i.	·	ty unsecured claims. Write that amount	6i.	Ψ		
		here.			\$	17,277.80	
	6i.	Total Nonpriority. Add lines	6f through 6i.	6i.	s	17 277 80	

Fill in this infor	mation to identify your	case:		
Debtor 1	Corina Yvette Yb	arra		
	First Name	Middle Name	Last Name)
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name]
United States Bankruptcy Court for the:		EASTERN DISTRICT O	F CALIFORNIA, FRESNO DIVISI	ON
Case number				
(if known)				☐ Che
				ame

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person o	r company with Name, Number	whom you have the r, Street, City, State and ZIP	e contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			<u> </u>
	Mullipel	Sileet			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			<u> </u>
	radifibol	Olicci			
	City		State	ZIP Code	_
2.3					
	Name				
	Number	04			<u> </u>
	Number	Street			
	City		State	ZIP Code	_
2.4	J.,		Oldio	2 0000	
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.5	City		State	ZIF Code	
2.5	Name				<u> </u>
	Hailie				
					<u></u>
	Number	Street			
	0.1		0	710.0	_
	City		State	ZIP Code	

					•
Fill in this	information to identify your	case:			
Debtor 1	Corina Yvette Yb				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filin	g) First Name	Middle Name	Last Name	_	
United Stat	es Bankruptcy Court for the:	EASTERN DISTRICT O	F CALIFORNIA, FRESN	NO DIVISION	
Case numb (if known)	per				☐ Check if this is an amended filing
	Form 106H ule H: Your Cod	ebtors			12/15
are filing to and numbe case numbe	gether, both are equally resp	onsible for supplying co the left. Attach the Additi question.	rrect information. If mo onal Page to this page.	ore space is needed, c . On the top of any Ad	e as possible. If two married people opy the Additional Page, fill it out, ditional Pages, write your name and
■ No					
Califor	nia, Idaho, Louisiana, Nevada				states and territories include Arizona,
	Go to line 3. . Did your spouse, former spou	se, or legal equivalent live w	ith you at the time?		
line 2 a	again as a codebtor only if th Schedule E/F (Official Form	at person is a guarantor o	or cosigner. Make sure	you have listed the c	with you. List the person shown in reditor on Schedule D (Official Forn lle E/F, or Schedule G to fill out
	Column 1: Your codebtor lame, Number, Street, City, State and 2	IP Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1	Name			_ ☐ Schedule D, lir☐ Schedule E/F,☐ Schedule G, lir☐	line
	Number Street City	State	ZIP Code	_	
3.2	Name			_ ☐ Schedule D, lir ☐ Schedule E/F, ☐ Schedule G, lir	line
	Number Street City	State	ZIP Code	_	

Fill	in this information t	o identify your cas	se:							
Del	btor 1	Corina Yvett	e Ybarra			_				
	btor 2 buse, if filing)									
Uni	ited States Bankrup	tcy Court for the:	EASTERN DISTRICT DIVISION	OF CALIFORNIA, FR	RESNO					
(If kr	se number nown) fficial Form	1061					Check if this is An amende A supplement income as	ed filing ent showing		chapter 13
-							MM / DD/ Y	YYY		
	chedule I:		ole. If two married peop							12/15
spo atta	use. If you are sep ch a separate shee rt 1: Describe	arated and your et to this form. O	re married and not filing spouse is not filing with the top of any addition	h you, do not include	informa	ation	about your spou	se. If more	space is ne	eded,
1.	Fill in your emploinformation.	oyment		Debtor 1			Debtor 2	or non-fil	ing spouse	
	If you have more t attach a separate information about	page with	Employment status	☐ Employed ■ Not employed			☐ Empl	oyed mployed		
	employers.		Occupation							
	Include part-time, self-employed wor		Employer's name							
	Occupation may i homemaker, if it a		Employer's address							
			How long employed th	nere?						
Par	rt 2: Give De	tails About Mont	hly Income							
	mate monthly inco		e you file this form. If yo	ou have nothing to repo	ort for any	y line	, write \$0 in the sp	ace. Include	e your non-filir	ig spouse
	ou or your non-filing s ce, attach a separate		than one employer, comb n.	oine the information for	all emplo	oyers	for that person on	the lines be	elow. If you ne	ed more
							For Debtor 1		otor 2 or ng spouse	
2.	, ,		r, and commissions (before the local culate what the monthly we have the monthly we ha	, ,	2.	\$	0.00	\$	N/A	
3.	Estimate and list	t monthly overting	ne pay.		3.	+\$.	0.00	+\$	N/A	
4.	Calculate gross	Income. Add line	2 + line 3.		4.	\$	0.00	\$	N/A_	

Debtor	Ybarra, Corina Yvette		Case r	number (if known)		
				Debtor 1	For Debtor	spouse
C	Copy line 4 here	4.	\$ <u></u>	0.00	\$	<u>N/A</u>
5. L	List all payroll deductions:					
5	5a. Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	N/A
5	5b. Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A
5	5c. Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A
5	5d. Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A
5	5e. Insurance	5e.	\$	0.00	\$	N/A
5	of. Domestic support obligations	5f.	\$	0.00	\$	N/A
5	5g. Union dues	5g.	\$	0.00	\$	N/A
5	5h. Other deductions. Specify:	5h.+	- \$	0.00	+ \$	N/A
6. A	Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$	N/A
7. C	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$	N/A
	List all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	N/A
0	Bb. Interest and dividends	8b.	\$ <u></u>	0.00	\$	N/A N/A
	Family support payments that you, a non-filing spouse, or a depending regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.		Ψ <u> </u>	0.00	\$	N/A
8	Bd. Unemployment compensation	8d.	\$_	1,800.00	\$	N/A
	Be. Social Security	8e.	\$_	0.00	\$	N/A
8	Offer government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistanthat you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	N/A
	Bg. Pension or retirement income	8g.	\$	0.00	\$	N/A
8	Bh. Other monthly income. Specify: Renter	8h.+	- \$	450.00	+ \$	N/A
9. A	Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	3,050.00	\$	N/A
	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	3	3,050.00 + \$_	N/A	= \$ 3,050.00
lı O	State all other regular contributions to the expenses that you list in Scheon neture contributions from an unmarried partner, members of your household, you other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not specify:	ur dependen	. ,	,		+\$0.00
	Add the amount in the last column of line 10 to the amount in line 11. The Nrite that amount on the Summary of Schedules and Statistical Summary of Ce					\$3,050.00
_	Do you expect an increase or decrease within the year after you file this fo	orm?				Combined monthly income

Fill	in this information to identify you	ır case:				
Deb	tor 1 Corina Yvette	e Ybarra		Check	if this is:	
				□ A	n amended filing	
	tor 2				supplement showi	ng postpetition chapter 13
(Spo	ouse, if filing)			е	xperises as or the r	ollowing date:
Unit	ed States Bankruptcy Court for the:	EASTERN DISTRICT OF CALIFO FRESNO DIVISION	RNIA,	M	IM / DD / YYYY	
Cas	e number					
1	nown)					
Of	fficial Form 106J					
S	chedule J: Your E	xpenses				12/15
Be info	as complete and accurate as p ormation. If more space is need known). Answer every question	ossible. If two married people are ded, attach another sheet to this fo				
Par		old				
1.	Is this a joint case?					
	■ No. Go to line 2.					
	Yes. Does Debtor 2 live in	a separate household?				
	□ No	file Official Form 106 L 2 Evnences f	for Congrete Househo	old of Dobtor 3	,	
	Tes. Debior 2 musi	file Official Form 106J-2, Expenses f	or Separate Housent	Diaoi Debioi 2	. .	
2.	Do you have dependents?	□ No				
	Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state the					□ No
	dependents names.		Daughter		16	Yes
						□ No
			Son		14	■ Yes
			_			□ No
			Son		2	Yes
						□ No
3.	Do your expenses include	=				☐ Yes
	expenses of people other that yourself and your dependent	ts? □ Yes				
Par Est		g Montnly Expenses ur bankruptcy filing date unless yo	ou are using this for	m as a suppl	ement in a Chapt	er 13 case to report
exp		nkruptcy is filed. If this is a supple				
Incl	lude expenses paid for with no	on-cash government assistance if y	you know the			
		e included it on Schedule I: Your li	ncome		Your expe	ancac
(On	ficial Form 106l.)				i oui expe	
4.	The rental or home ownership payments and any rent for the g	ip expenses for your residence. Incorporation	clude first mortgage	4. \$		0.00
	If not included in line 4:					
	4a. Real estate taxes			4a. \$		0.00
	4b. Property, homeowner's,	or renter's insurance		4b. \$		0.00
	4c. Home maintenance, rep	air, and upkeep expenses		4c. \$		120.00
_	4d. Homeowner's associatio			4d. \$		0.00
5.	Additional mortgage paymer	nts for your residence, such as hom	ne equity loans	5. \$		0.00

Deb	otor 1	Ybarra, Corina Yvette Case number (if known)			
6.	Utiliti	es:			
0.	6a.	Electricity, heat, natural gas	6a.	\$	174.00
	6b.	Water, sewer, garbage collection	6b.		80.00
	6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	120.00
	6d.	Other. Specify:	6d.	·	0.00
7.		and housekeeping supplies	— 7.	· : ———	600.00
8.		care and children's education costs	8.	\$	0.00
9.		ing, laundry, and dry cleaning	9.	\$	60.00
		onal care products and services	10.	·	0.00
11.		cal and dental expenses	11.	·	0.00
		sportation. Include gas, maintenance, bus or train fare.		Ψ	0.00
12.		of the state of th	12.	\$	90.00
13.		tainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
14.		table contributions and religious donations	14.	\$	0.00
15.	Insur	•			
	Do no	of include insurance deducted from your pay or included in lines 4 or 20.			
	15a.	Life insurance	15a.	\$	0.00
	15b.	Health insurance	15b.	\$	0.00
	15c.	Vehicle insurance	15c.	\$	135.00
	15d.	Other insurance. Specify:	15d.	\$	0.00
16.		s. Do not include taxes deducted from your pay or included in lines 4 or 20.		· -	<u> </u>
	Speci	fy:	16.	\$	0.00
17.		Ilment or lease payments:	47-	•	
		Car payments for Vehicle 1	17a.		0.00
		Car payments for Vehicle 2	17b.	·	0.00
		Other. Specify:	17c.		0.00
		Other. Specify:	17d.	\$	0.00
18.		payments of alimony, maintenance, and support that you did not report as	18.	\$	0.00
10		cted from your pay on line 5, Schedule I, Your Income (Official Form 106I). repayments you make to support others who do not live with you.	10.	\$	0.00
15.	Speci		19.	Ψ	0.00
20		real property expenses not included in lines 4 or 5 of this form or on Schee		ır Income	
_0.		Mortgages on other property	20a.		0.00
		Real estate taxes	20b.		0.00
		Property, homeowner's, or renter's insurance	20c.	·	0.00
		Maintenance, repair, and upkeep expenses	20d.	·	0.00
		Homeowner's association or condominium dues	20a. 20e.	\$	0.00
21.		: Specify:		+\$	
۷١.	Othe	. Specify.		Τψ	0.00
22.		llate your monthly expenses			
		Add lines 4 through 21.		\$	1,379.00
	22b. (Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	22c. /	Add line 22a and 22b. The result is your monthly expenses.		\$	1,379.00
23	Calcı	ulate your monthly net income.			
20.		Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	3,050.00
		Copy your monthly expenses from line 22c above.	23b.		1,379.00
	200.	Copy your monthly expenses from the 220 above.	200.	*	1,37 3.00
	23c.	Subtract your monthly expenses from your monthly income.			
		The result is your monthly net income.	23c.	\$	1,671.00
0.4	D	the state of the s	415 (1.15)	·	
24.		bu expect an increase or decrease in your expenses within the year after yo ample, do you expect to finish paying for your car loan within the year or do you expect you			or decrease because of a
		cation to the terms of your mortgage?	ıı monyaye p	Jayment to increase	or accrease because or a
	■ No				
	☐ Ye				
	— 16	io. ⊑∧ριαπ ποτο.			

Fill in t	his inform	nation to identify your o	rase:			
Debtor		Corina Yvette Yb				
Debtoi	•	First Name	Middle Name	Last Name		
Debtor : (Spouse if		First Name	Middle Name	Last Name		
United 9	States Bar	nkruptcy Court for the:	EASTERN DISTRICT	OF CALIFORNIA, FRESNO D	DIVISION	
Case nu (if known)						☐ Check if this is an amended filing
		<u>106Dec</u> ion About a	ın Individua	l Debtor's Sch	nedules	12/15
obtainin	g money r both. 18	or property by fraud in U.S.C. §§ 152, 1341, 15	connection with a bank			nent, concealing property, or , or imprisonment for up to 20
	Sign	Below				
Di	d you pay	or agree to pay some	one who is NOT an attor	ney to help you fill out bank	ruptcy forms?	
	No					
	Yes. N	ame of person				kruptcy Petition Preparer's Notice, , and Signature (Official Form 119)
		ty of perjury, I declare to true and correct.	that I have read the sum	mary and schedules filed wi	ith this declaration	and
Х	/s/ Cori	na Yvette Ybarra		X		
	Corina	Yvette Ybarra e of Debtor 1		Signature of De	ebtor 2	
	Date J	anuary 24, 2018		Date		

Fill in this information to identify your case:								
Corina Yvette Yb	arra							
First Name	Middle Name	Last Name						
First Name	Middle Name	Last Name						
nkruptcy Court for the:	EASTERN DISTRICT C	F CALIFORNIA, FRESNO DIVISION						
	Corina Yvette Yb	Corina Yvette Ybarra First Name Middle Name First Name Middle Name						

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Pa	rt 1: Summarize Your Assets		
		Your a	assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	201,480.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	9,572.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	211,052.00
Pa	rt 2: Summarize Your Liabilities		
			iabilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	181,099.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e &chedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j &chedule E/F	\$	17,277.80
	Your total liabilities	\$	198,376.80
Pa	rt 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income(Official Form 106I) Copy your combined monthly income from line 12 oSchedule I	\$	3,050.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,379.00
Pa	Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your of	her schedu	ıles.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a p purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C.§ 159.	ersonal, fa	mily, or household

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the

court with your other schedules.

Debtor 1 Ybarra, Corina Yvette

Case number (if known)

8. **From the** Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____3,476.38

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	1
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

FilLin	this inform	nation to identify you	r case:			
Debto		Corina Yvette Y	_			
Debit) i	First Name	Middle Name	Last Name		
Debto	or 2 e if, filing)	First Name	Middle Name	Last Name		
	. 0,				(1010)	
Unite	d States Bar	nkruptcy Court for the:	EASTERN DISTRICT OF	CALIFORNIA, FRESNO DIV	/ISION	
Case (if know	number _				. –	check if this is an mended filing
	cial Fo		Affairs for Indivic	luals Filing for B	ankruptcv	4/10
Be as inform	complete a nation. If mo	nd accurate as possil ore space is needed, er every question.	ole. If two married people are	e filing together, both are ed nis form. On the top of any a	qually responsible for supply additional pages, write your i	ring correct
	_	current marital statu		Lived Belole		
	_	Current maritar state	3 :			
•	Not mar	ried				
2. D	Ouring the la	ist 3 years, have you	lived anywhere other than w	here you live now?		
	■ No □ Yes. Lis	t all of the places you li	ved in the last 3 years. Do not i	nclude where you live now.		
ı	Debtor 1 Pri	or Address:	Dates Debtor 1 there	lived Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					y property state or territory? co, Texas, Washington and Wis	
į	No					
L	→ Yes. Ma	ke sure you fill out <i>Sch</i>	edule H: Your Codebtors (Offic	cial Form 106H).		
Part 2	2 Explai	n the Sources of You	r Income			
F	ill in the tota	I amount of income yo	nployment or from operating u received from all jobs and a nave income that you receive to	Il businesses, including part-		ar years?
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	ast calendaı ıary 1 to De	year: cember 31, 2017)	■ Wages, commissions, bonuses, tips	\$28,512.60	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Debte	or 1 Y	oarra, Corina Yv	ette			Cas	se number (if known)		
			Debte	or 1			Debtor 2		
				ces of income k all that apply.	Gross in (before of exclusion	deductions and	Sources of inc		Gross income (before deductions and exclusions)
For the calendar year before that: (January 1 to December 31, 2016)		6) - "	■ Wages, commissions, bonuses, tips		\$57,836.00	☐ Wages, combonuses, tips	nmissions,		
			□ O _F	perating a business			☐ Operating a	business	
lı cı y	nclude ind ther publou are fili	come regardless of ic benefit payments ng a joint case and	whether that in pensions; ren you have incor	ntal income; interest; div me that you received to	iples of othe vidends; mo gether, list it	er income are alim ney collected fron only once under	n lawsuits; royalties Debtor 1.	; and gambli	urity, unemployment, and ng and lottery winnings. I
L	ust each s	source and the gros	s income from	each source separatel	ly. Do not inc	clude income that	you listed in line 4.		
[□ No ■ Yes.	Fill in the details.							
				or 1 ces of income ibe below.	each so	deductions and	Sources of inc Describe below		Gross income (before deductions and exclusions)
From the d	January ate you	/ 1 of current year filed for bankrupto	^{until} Uner ^{y:} bene	mployment fits		\$1,800.00			
		dar year: December 31, 201	Uner 7) bene	mployment efits		\$8,550.00			
Dovi	2	t Cartain Baymant	a Vau Mada I	Pafara Var. Filad for F	Paulser mtars				
Part	S. LIS	Certain Payment	s rou wade i	Before You Filed for E	sankruptcy				
_	Are eithe No.	Neither Debtor 1	nor Debtor 2	s primarily consumer I has primarily consul al, family, or household	mer debts.	Consumer debts	are defined in 11 L	J.S.C. § 101(8) as "incurred by an
			-	led for bankruptcy, did	you pay any	creditor a total of	\$6,425* or more?		
		_ 110. 00 1	o line 7.	ditor to whom you noid	a total of Co	* 10E* or more in		nto and tha t	atal amount vay paid that
		credi paym	tor. Do not inc ents to an atto		mestic supp cy case.	ort obligations, si	uch as child suppo	rt and alimor	otal amount you paid that ny. Also, do not include
ı	Yes.			have primarily consul		creditor a total of	\$600 or more?		
			o line 7.		, , . ,		• • • • • • • • • • • • • • • • • • • •		
		■ Yes List by paym	elow each cre						editor. Do not include /ments to an attorney for
	Creditor	's Name and Addr	ess	Dates of payme	ent	Total amount paid	Amount you still owe	Was this	payment for
	PO Box	Auto Finance 440609 aw, GA 30160-9	9511	12/13/17 \$423 11/13/17 \$423		\$846.00	\$5,786.10		

Case number (if known)

7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.										
	■ No										
	Yes. List all payments to an insider.										
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment					
8.	Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider.										
	No Yes. List all payments to an insider										
		Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment					
			paid	Juli Owe	molade crea	noi 3 name					
Pai	rt 4: Identify Legal Actions, Repossessions, a	and Foreclosures									
9.	Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.										
	Yes. Fill in the details.	Notice of the case				Status of the case					
	Case title Case number	Nature of the case	Court or agency		Status of th	e case					
10.	Within 1 year before you filed for bankruptcy, Check all that apply and fill in the details below. ■ No. Go to line 11. □ Yes. Fill in the information below.	was any of your prope	rty repossessed, for	eclosed, garnisl	ned, attached, s	seized, or levied?					
		Describe the Property Explain what happened		Date		Value of the property					
11.	Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details.										
	Creditor Name and Address	Describe the action the	creditor took	Date take	action was	Amount					
12.	Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?										
	■ No □ Yes										
Pai	rt 5: List Certain Gifts and Contributions										
13.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No										
	Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person	Describe the gifts		Date the g	s you gave jifts	Value					
	Person to Whom You Gave the Gift and Address:										

Debtor 1 Ybarra, Corina Yvette

Deb	otor 1 Ybarra, Corina Yvette		Case number (if known)							
14	Within 2 years before you filed for bankrus	ntov dia	l vou give any gifts or contributions	with a total v	value of more than \$	600 to any charity?				
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution.									
	Gifts or contributions to charities that tot more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	al	Describe what you contributed		Dates you contributed	Value				
Par	t 6: List Certain Losses									
15.	Within 1 year before you filed for bankrupt or gambling?	cy or si	nce you filed for bankruptcy, did yo	ou lose anythi	ng because of theft	, fire, other disaster,				
	■ No □ Yes. Fill in the details.									
	Describe the property you lost and how the loss occurred	nclude t	e any insurance coverage for the location amount that insurance has paid. Live a location on line 22 of School via A/P: F	ist pending	Date of your loss	Value of property lost				
	<u></u>	nsuranc	e claims on line 33 of <i>Schedule A/B: F</i>	roperty.						
Par	t 7: List Certain Payments or Transfers									
16.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.									
	□ No									
	Yes. Fill in the details.									
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You		Description and value of any property transferred		Date payment or transfer was made	Amount of payment				
	Phillip Gillet, Jr. Attorney at Law 1705 27th St Bakersfield, CA 93301-2807		United States currency		1/19/18	\$2,500.00				
17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details.									
	Person Who Was Paid Address		Description and value of any property transferred		Date payment or transfer was made	Amount of payment				
18.	Within 2 years before you filed for bankrup transferred in the ordinary course of your Include both outright transfers and transfers m gifts and transfers that you have already listed No	busines ade as s	ss or financial affairs? security (such as the granting of a secu		rty to anyone, other					
	☐ Yes. Fill in the details.									
	Person Who Received Transfer Address		Description and value of property transferred		ny property or received or debts change	Date transfer was made				
	Person's relationship to you									

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a

	beneficiary? (These are often called asset-proNoYes. Fill in the details.	несиоп aevices.)									
	Name of trust	Description and	value of the prop	perty trans	sferred	Date Transfer was made					
Par	t 8: List of Certain Financial Accounts, In	struments. Safe Deposi	it Boxes, and Sto	rage Units		maao					
	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, chouses, pension funds, cooperatives, associated No	y, were any financial a	ccounts or instru	ments hel	ld in your name, or for y						
	Yes. Fill in the details.										
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accordinstrument	unt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer					
21.	Do you now have, or did you have within 1 yearsh, or other valuables?	year before you filed fo	or bankruptcy, an	y safe dep	oosit box or other depos	sitory for securities,					
	■ No □ Yes. Fill in the details.										
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had ac Address (Number and ZIP Code)		Describe	e the contents	Do you still have it?					
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?										
	■ No □ Yes. Fill in the details.										
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	to it?	Address (Number, Street, City, State		e the contents	Do you still have it?					
Par	t 9: Identify Property You Hold or Control	for Someone Else									
23.	Do you hold or control any property that so someone.	meone else owns? Inc	lude any property	you borr	rowed from, are storing	for, or hold in trust for					
	■ No □ Yes. Fill in the details.										
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City Code)		Describe	e the property	Value					
Par	t 10: Give Details About Environmental Info	ormation									

- r material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Del	otor 1	Ybarra, Corina Yvette		Case num	nber (if known)							
24.	Has a	any governmental unit notified you that	you may be liable or potentially liable u	ınder or in	violation of an environmer	ntal law?						
	_	No										
	Ш	Yes. Fill in the details.										
		ne of site ress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		onmental law, if you it	Date of notice						
25.	Have	you notified any governmental unit of a	any release of hazardous material?									
	_	No Yes. Fill in the details.										
		ne of site ress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		onmental law, if you it	Date of notice						
26.	Have	you been a party in any judicial or adm	ninistrative proceeding under any enviro	onmental I	aw? Include settlements an	d orders.						
		No										
		Yes. Fill in the details.										
		e Title e Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of	the case	Status of the case						
Par	t 11:	Give Details About Your Business or C	Connections to Any Business									
27	Withi	in 4 years before you filed for bankrupto	ry did you own a business or have any	of the foll	owing connections to any h	nusiness?						
		Nithin 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time										
		☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)										
		☐ A partner in a partnership —										
		☐ An officer, director, or managing executive of a corporation										
		☐ An owner of at least 5% of the voting or equity securities of a corporation										
		No. None of the above applies. Go to Part 12.										
		Yes. Check all that apply above and fill	in the details below for each business.									
		iness Name	Describe the nature of the business	Employer Identification number								
		ress ber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security number or ITIN. Dates business existed								
28.		in 2 years before you filed for bankrupto autions, creditors, or other parties.	cy, did you give a financial statement to	anyone a	bout your business? Includ	le all financial						
		No										
	_	Yes. Fill in the details below.										
	Nam	ne	Date Issued									
		ress ber, Street, City, State and ZIP Code)										
Par	t 12:	Sign Below										
true ban	and c	d the answers on this Statement of Final correct. I understand that making a false by case can result in fines up to \$250,000 \$\\$ 152, 1341, 1519, and 3571.	statement, concealing property, or obt	aining mo								
		na Yvette Ybarra	-									
		Yvette Ybarra e of Debtor 1	Signature of Debtor 2									
Dat	e <u>J</u>	anuary 24, 2018	Date									

Debtor 1	Ybarra, Corina	a Yvette		Case number (if known)
Did you att ■ No □ Yes	ach additional pa	ges to Your Statement of Fi	nancial Affairs for Ir	ndividuals Filing for Bankruptcy (Official Form 107)?
Did you pa ■ No	y or agree to pay	someone who is not an atto	orney to help you fill	out bankruptcy forms?
☐ Yes. Na	me of Person	. Attach the Bankruptcy Per	tition Preparer's Notice	e, Declaration, and Signature (Official Form 119).

Fill in this information to identify your case:							
Debtor 1	Corina Yvette Ybarra						
Debtor 2 (Spouse, if filing)							
United States B	ankruptcy Court for the:	Eastern District of California, Fresno Division					
Case number (if known)							

Check as directed in lines 17 and 21:								
According to the calculations required by this Statement:								
-	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).							
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).							
	3. The commitment period is 3 years.							

☐ Check if this is an amended filing

☐ 4. The commitment period is 5 years.

Official Form 122C-1

profession, or farm

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part	1: Calculate Your Average Monthly Income								
1.	What is your marital and filing status? Check one only.								
	■ Not married. Fill out Column A, lines 2-11.								
	☐ Married. Fill out both Columns A and B, lines 2-11.								
10 6	Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.								
			lumn A btor 1	Column B Debtor 2 or non-filing spouse					
2.	Your gross wages, salary, tips, bonuses, overtime, and commissions (befor payroll deductions).	e all \$_	1,026.38	\$					
3.	Alimony and maintenance payments. Do not include payments from a spouse Column B is filled in.	if \$_	800.00	\$					
4.	All amounts from any source which are regularly paid for household expen of you or your dependents, including child support. Include regular contribut from an unmarried partner, members of your household, your dependents, parents roommates. Do not include payments from a spouse. Do not include payments y listed on line 3	ions , and	0.00	\$					
5	Not income from operating a business	_							

Gross receipts (before all deductions) 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 Net monthly income from a business, profession, or farm \$ 6. Net income from rental and other real property Debtor 1 150.00 Gross receipts (before all deductions) 0.00 Ordinary and necessary operating expenses Сору Net monthly income from rental or other real 150.00 here -> \$ 150.00 \$ property

0.00

Debtor 1

\$

Debtor 1	Ybarra, Corina Yvette		Case nu	mber (if known)		
			Column Debtor		Column B Debtor 2 o	or	
7 In	terest, dividends, and royalties		\$	0.00	\$	•	
	nemployment compensation		\$	1,500.00	- \$ -		
D	o not enter the amount if you contend that the amount received was a benefit ocial Security Act. Instead, list it here:	under the		-1,000.00	- · · <u></u>		
		.00					
	For your spouse \$						
	ension or retirement income. Do not include any amount received that was noter the Social Security Act.	a benefit	\$	0.00	\$		_
no a	come from all other sources not listed above. Specify the source and an of include any benefits received under the Social Security Act or payments received with of a war crime, a crime against humanity, or international or domestic to necessary, list other sources on a separate page and put the total below.	eived as					
			\$	0.00	\$		_
	<u> </u>		\$	0.00	\$		
	Total amounts from separate pages, if any.	+	\$	0.00	\$		_
	alculate your total average monthly income. Add lines 2 through 10 for ach column. Then add the total for Column A to the total for Column B.	\$	3,476.38	3 + \$	· · · · · · · · · · · · · · · · · · ·	\$_	3,476.38
	Operation of the Determine How to Measure Your Deductions from Income opy your total average monthly income from line 11. alculate the marital adjustment. Check one:					\$	3,476.38
	You are not married. Fill in 0 below.						
	Fill in the amount of the income listed in line 11, Column B, that was NO such as payment of the spouse's tax liability or the spouse's support of so					of you or	your dependent
	Below, specify the basis for excluding this income and the amount of income a separate page.	me devote	ed to each	purpose. If	necessary, lis	t additiona	al adjustments on
	If this adjustment does not apply, enter 0 below.	•					
		- \$					
		-					
	Total	\$		0.00	Copy here=>		0.00
14. `	Your current monthly income. Subtract line 13 from line 12.					\$	3,476.38
15. (Calculate your current monthly income for the year. Follow these steps:						
•	15a. Copy line 14 here=>					\$	3,476.38
	Multiply line 15a by 12 (the number of months in a year).					<u>x</u> _	12
	15b. The result is your current monthly income for the year for this part of the	e form				\$	41,716.56

Debt	or 1	Yba	rra, Corina Yvette		Case number (if known)		
16	. Cal	culate	the median family income that applies to y	ou. Follow these	steps:		
	16a	. Fill in	the state in which you live.	CA			
	16b	. Fill ir	n the number of people in your household.	4			
			the median family income for your state and	size of househol	d.	\$	89,444.00
			nd a list of applicable median income amounts uctions for this form. This list may also be avail			*	
17	. Hov	v do t	he lines compare?				
	17a		Line 15b is less than or equal to line 16c. (U.S.C. § 1325(b)(3). Go to Part 3. Do NOT		e 1 of this form, check box <i>Qisposable incom</i> on of Your Disposable Income (Official Form 1		rmined under 11
	17b	. C		lation of Your [form, check box <i>Disposable income is deteri</i> Disposable Income (Official Form 122C-2).		
Par	t 3:	Ca	Iculate Your Commitment Period Under 11	J.S.C. § 1325(b)	(4)		
18.	Cop	эу уог	ur total average monthly income from line 1	1		\$	3,476.38
19.	that	calcu	ne marital adjustment if it applies. If you are lating the commitment period under 11 U.S.C. § opy the amount from line 13.				
	19a	. If the	e marital adjustment does not apply, fill in 0 on	line 19a.		-\$	0.00
	19b	. Subt	tract line 19a from line 18.			\$	3,476.38
20.	Cal	culate	your current monthly income for the year.	Follow these ste	eps:		
	20a	. Copy	y line 19b			\$	3,476.38
		Multi	iply by 12 (the number of months in a year).			x	12
	20b	. The	result is your current monthly income for the ye	ar for this part of	the form	\$	41,716.56
						<u> </u>	
	20c	. Copy	y the median family income for your state and si	ze of household	from line 16c	\$_	89,444.00
	21.	How	do the lines compare?			L	
			Line 20b is less than line 20c. Unless otherwis is 3 years. Go to Part 4.	e ordered by the	court, on the top of page 1 of this form, check	box 3, The co	ommitment period
			Line 20b is more than or equal to line 20c. Unle commitment period is 5 years. Go to Part 4.	ess otherwise ord	lered by the court, on the top of page 1 of this	form, check b	oox 4, The
Par	t 4:	Sig	gn Below				
	Bys	signing	g here, under penalty of perjury I declare that the	e information on t	his statement and in any attachments is true a	and correct.	
)	(/s	/ Cor	ina Yvette Ybarra				
-	C	orina	Yvette Ybarra				
		•	e of Debtor 1				
	Dal		nuary 24, 2018 1/DD /YYYY				
	If yo	ou che	cked 17a, do NOT fill out or file Form 122C-2.				
	If yo	ou che	cked 17b, fill out Form 122C-2 and file it with	his form. On line	39 of that form, copy your current monthly in	ncome from li	ne 14 above.

Fill in this information to identify your case:							
Debtor 1	Corina Yvette Ybarr	a					
Debtor 2 (Spouse, if filing	Debtor 2 (Spouse, if filing)						
United States Bankruptcy Court for the:		Eastern District of California, Fresno Division					
Case number (if known)							

☐ Check if this is an amended filing

Official Form 122C-2

Chapter 13 Calculation of Your Disposable Income

04/16

To fill out this form, you will need your completed copy of Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period (Official Form 122C-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form, Include the line number to which additional information applies. On the top any additional pages, write your name and case number (if known).

Part 1:

Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not include any operating expenses that you subtracted from income in lines 5 and 6 of Form 122C–1, and do not deduct any amounts that you subtracted from your spouse's income in line 13 of Form 122G-1.

If your expenses differ from month to month, enter the average expense.

Note: Line numbers 1-4 are not used in this form. These numbers apply to information required by a similar form used in chapter 7 cases.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

4 Living 0 Housing

National Standards

You must use the IRS National Standards to answer the questions in lines 6-7.

5. **Food, clothing, and other items:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

1.650.00

7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health car costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

Debtor 1	Ybarra, Corina Yvette	Case number (if known)

Peo	ple w	ho are under 65 years of age										
	7a.	Out-of-pocket health care allowance per person	\$_		49							
	7b.	Number of people who are under 65	x _		4							
	7c.	Subtotal. Multiply line 7a by line 7b.	\$_	19	96.00		Copy here=	> \$	19	6.00		
Peo	ple w	ho are 65 years of age or older										
	7d.	Out-of-pocket health care allowance per person	\$_		117							
	7e.	Number of people who are 65 or older	X _		0							
	7f.	Subtotal. Multiply line 7d by line 7e.	\$_		0.00		Copy here=	> \$		0.00		
	7g.	Total. Add line 7c and line 7f				\$	196.00		Copy tota	I here=>	\$	196.00
Base purp H H To a	Local Standards You must use the IRS Local Standards to answer the questions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: Housing and utilities - Insurance and operating expenses Housing and utilities - Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. 8. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill in the dollar amount listed for your county for insurance and operating expenses.											
9.	Hou	ising and utilities - Mortgage or rent expenses:										
	9a.	Using the number of people you entered in line 5, fil listed for your county for mortgage or rent expenses.	l in th	ne dollai	r amour	nt		\$	1,38	35.00		
	9b.	Total average monthly payment for all mortgages and	othei	r debts s	secured	by your h	nome.					
		To calculate the total average monthly payment, add contractually due to each secured creditor in the 60 m bankruptcy. Next divide by 60.	d all a	amounts	s that a	re						
		Name of the creditor		Avera payme	ge mor ent	nthly						
		Wells Fargo Hm Mortgag		\$	1,0	41.00						
		9b. Total average monthly payme	nt	\$	1,0	41.00	Copy here=>	-\$ _	1,0	41.00	Repeat on line 3	this amount 33a.
	9c.	Net mortgage or rent expense.					_		-	ı		
		Subtract line 9b (total average monthly paymen) from rent expense). If this number is less than \$0, enter \$		e 9a (mo	ortgage	or	\$	34	44.00	Copy here=>	\$	344.00
10.	•	ou claim that the U.S. Trustee Program's division o					•	inco	rrect and		\$	0.00
	Ex	plain why:										

Case number (if known)

11.	Local transportation expenses: Check the number of vehicle	es for which you claim an	ownership o	r operating exp	oense.	
	□ 0. Go to line 14.					
	■ 1. Go to line 12.					
	2 or more. Go to line 12.					
12.	Vehicle operation expense: Using the IRS Local Standards expenses, fill in the Operating Costs that apply for your Census				e operating \$	220.00
13.	Vehicle ownership or lease expense: Using the IRS Local S may not claim the expense if you do not make any loan or lease two vehicles.					
Vel	Describe Vehicle 1:					
13a.	Ownership or leasing costs using IRS Local Standard			485.00		
13b.	Average monthly payment for all debts secured by Vehicle 1. Do not include costs for leased vehicles.					
	To calculate the average monthly payment here and on line 1 contractually due to each secured creditor in the 60 months after Then divide by 60.					
	Name of each creditor for Vehicle 1	Average monthly payment				
	Carmax Auto Finance	\$ 94.03				
	Total Average Monthly Payment	\$94.03	Copy here => -	\$94	Repeat this amount on line 33b.	
13c.	Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if the numbert is less than \$0	, enter \$0	\$	390.97	Copy net Vehicle 1 expense here => \$	390.97
Vel	nicle 2 Describe Vehicle 2:				J	
13d.	Ownership or leasing costs using IRS Local Standard		\$	0.00		
13e.	Average monthly payment for all debts secured by Vehicle 2. D leased vehicles.	o not include costs for				
	Name of each creditor for Vehicle 2	Average monthly payment				
		\$				
	Total average monthly payment	\$	Copy here => -\$	0.0	Repeat this amount on line 33c.	
13f.	Net Vehicle 2 ownership or lease expense				Copy net Vehicle 2	
	Subtract line 13e from line 13d. if this number is less than \$0,	enter \$0	\$	0.00	expense here	0.00
14.	Public transportation expense: If you claimed 0 vehicles in Public Transportation expense allowance regardless of w				」 he \$	0.00
15.	Additional public transportation expense: If you claimed 1 deduct a public transportation expense, you may fill in what you more than the IRS Local Standard for Public Transportation.					0.00

Ybarra, Corina Yvette

Debtor 1

Debtor 1 Ybarra, Corina Yvette Case number (if known)

Oth	er Necessary Expenses	In addition to the expense of the following IRS categories		listed above, y	ou are allowed your monthly expenses for		
16.	Taxes: The total monthly ar self-employment taxes, soci pay for these taxes. However that number from the total monot include real estate, s	\$	95.12				
17.	Involuntary deductions: I union dues, and uniform co						
	Do not include amounts that	t are not required by your job	, such as v	oluntary 401(k	c) contributions or payroll savings.	\$	32.80
18.	Life Insurance: The total material together, include payments Do not include premiums for life insurance other than terms.	\$	0.00				
19.	Court-ordered payments: agency, such as spousal or		at you pay	as required by	the order of a court or administrative		
	Do not include payments o	n past due obligations for sp	oousal or c	hild support. Y	ou will list these obligations in line 35.	\$	0.00
20.	Education: The total month as a condition for your jo	, , , ,	ducation th	at is either req	uired:		
	for your physically or me	ntally challenged dependent	child if no p	oublic education	on is available for similar services.	\$	0.00
21.				-	ng, daycare, nursery, and preschool.	\$	0.00
22.	Do not include payments for any elementary or secondary school education. 2. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7.						0.00
	•	nce or health savings accoun				\$	0.00
23. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted.						+\$	0.00
24.	Add all of the expenses a Add lines 6 through 23.	llowed under the IRS expe	nse allowa	ances.		\$	3,544.89
Add	itional Expense Deduction	s These are additional of	deductions	allowed by the	Means Test.		
		Note: Do not include a	any expens	e allowances l	isted in lines 6-24.		
25.					es. The monthly expenses for health necessary for yourself, your spouse, or you	ır	
	Health insurance		\$	0.00			
	Disability insurance		\$	0.00			
	Health savings account		+ \$	0.00	_		
	Total		\$	0.00	Copy total here=>	\$	0.00
	Do you actually spend this No. How much do y				_		
	Yes		\$				
26.	continue to pay for the reason household or member of you	onable and necessary care a	nd support nable to pa	of an elderly, of for such expe	actual monthly expenses that you will chronically ill, or disabled member of your enses. These expenses may include	\$	0.00
27.	Protection against family		ecessary m	nonthly expens	es that you incur to maintain the safety of er federal laws that apply.		
		the nature of these expense				\$	0.00

ebtor 1	Ybarra, Corina Yvette	Case numbe	er (if known)			
28.	Additional home energy costs. Your home	e energy costs are included in your insurance and oper	ating expens	es on line 8	3.	
	If you believe that you have home energy costhen fill in the excess amount of home energ					
	You must give your case trustee documental claimed is reasonable and necessary.	tion of your actual expenses, and you must show that the	he additional	amount	\$_	0.00
29.		ren who are younger than 18. The monthly expense endent children who are younger than 18 years old to a			:	
	You must give your case trustee documental reasonable and necessary and not already a	tion of your actual expenses, and you must explain why ccounted for in lines 6-23.	the amount	claimed is		
	* Subject to adjustment on 4/01/19, and ever	ry 3 years after that for cases begun on or after the date	e of adjustme	ent.	\$_	0.00
		ne monthly amount by which your actual food and cloth ances in the IRS National Standards. That amount can B National Standards.				
	To find a chart showing the maximum additional this form. This chart may also be available at	r				
	You must show that the additional amount cl	\$_	0.00			
	Continuing charitable contributions. The instruments to a religious or charitable organ	amount that you will continue to contribute in the form ization. 11 U.S.C. § 548(d)(3) and (4).	of cash or fir	nancial		
	Do not include any amount more than 15%	of your gross monthly income.				0.00
32.	Add all of the additional expense deductional lines 25 through 31.	ions.			\$	0.00
33. F	·	in property that you own, including home mortgag	jes, vehicle l	loans,		
33. F	For debts that are secured by an interest is und other secured debt, fill in lines 33a the control of calculate the total average monthly payment the 60 months after you file for bankruptcy. The	nt, add all amounts that are contractually due to each se			Avera	ge monthly
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Debtor 1	Yba	rra, Corina Yvette			Cas	e num	nber (if known)			
			33 secured by your primary support or the support of yo			or				
[□ No.	Go to line 35.								
j	Yes.		must pay to a creditor, in addi of your property (called the <i>cur</i> below.				n			
Nar	ne of the	creditor	Identify property that secures	s the deb	ot	Tota	al cure amount		Monthly amount	
We	ells Far	go Hm Mortgag			\$		8,644.20	÷ 60 = 3	\$	144.07
					\$			÷ 60 = \$	\$	
					\$			÷ 60 = +	\$	
								Сор		
					Total	\$	144.07	total	! :=> \$	144.07
36. F	□ Yes.	priority claims, such as thos Total amount of all past-du d monthly Chapter 13 plan	ue priority claims			goine \$ \$	0.00	_ ÷6	0 \$_	0.00
(E	Office of Executive To find a l	the United States Courts (for e Office for United States Trust ist of district multipliers that include	districts in Alabama and Nort	th Caroli he link sp	ina) or by the pecified in the	×_		ີ Copy to	otal	
A	Average	monthly administrative expens	е			\$	S	here=>		
37.		of the deductions for debt es 33e through 36.	payment.						\$	1,279.10
Tota	l Deduc	tions from Income								
38.	Add all d	of the allowed deductions.								
	expens			\$	3,544.89)				
	Copy lin	ne 32, All of the additional exp	ense deductions	\$	0.00	<u> </u>				
	Copy lin	ne 37, All of the deductions for	debt payment	+\$	1,279.10					
	Total de	eductions		\$	4,823.99		Copy total here=	>	\$	4,823.99

De	btor	1 Yba	arra, Corina	a Yvette			C	Case n	umber (if known)			
Pa	ırt 2	2: De	etermine You	ur Disposable Income Under 11 U	.S.C. § 1325	5(b)(2	2)					
	39.	Copy y Statem	our total cur ent of Your (rent monthly income from line 14 Current Monthly Income and Cald	4 of Form 12 culation of 0	22C-1 Comr	1, Chapter 13 mitment Period.	! <u>.</u>		\$ <u> </u>	3,470	6.38
	40.	children disabilit in accor	n. The monthl y payments fo	oly necessary income you receive ly average of any child support paym or a dependent child, reported in Po oplicable nonbankruptcy law to the e nild.	nents, foster art I of Form	care 1220	payments, or C-1, that you red	ceive		0.00		
41. Fill in all qualified retirement deductions. The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 362(b)(19).												
	42.	Total of	f all deductio	ons allowed under 11 U.S.C. § 707	′(b)(2)(A). C	opy li	ine 38 here	=>	\$ 4,82	23.99		
	43.	and you expense	have no reas es. You must (ial circumstances. If special circun onable alternative, describe the special give your case trustee a detailed export he expenses.	cial circums	ance	s and their					
	Des	scribe th	ne special cir	rcumstances			Amount of ex	pens	e			
						\$	§		<u> </u>			
						_ \$	·		_			
						\$	<u> </u>		_			
					Total	\$_	0.00		Copy here=> \$	0.	0.00	
	44.	Total a	djustments. /	Add lines 40 through 43			=>	\$_	4,823.99	Copy here=		3.99
	45.	Calcula	ate your mon	thly disposable income under § ²	1325(b)(2). S	Subtra	act line 44 from	line (39.	\$	-1,347.6	61
Pa	ırt 3	3: C	hange in Inco	ome or Expenses								
	46.	in this for bankrup example column,	orm have char otcy petition ar e, if the wages , enter line 2 ir	or expenses. If the income in Form rexpenses. If the income in Form and during the time your case will be reported increased after you filed yn the second column, explain why the fill in the amount of the increase.	e after the dopen, fill in the cour petition,	ate yo ne inf checl	ou filed your formation below. k 122C-1 in the f	For first	1			
	For	m	Line	Reason for change			Date of chang	ge	Increase or decrease?	Amo	ount of change	
		122C-1 122C-2 122C-1 122C-2 122C-1 122C-2 122C-1							☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Increase ☐ Increase	\$ _ \$ _ \$ _		
		122C-2							Decrease	\$_		

Debtor 1	Ybarra, Corina Yvette	Case number (if known)
Part 4:	Sign Below	
ı	By signing here under penalty of perjury you	declare that the information on this statement and in any attachments is true and correct.
	by signing fiere, ander perially or perjury years	assisted that the information on this statement and in any attachments is that and correct.
Х	/s/ Corina Yvette Ybarra	
•	Corina Yvette Ybarra	
	Signature of Debtor 1	
Date		
	January 24, 2018	
	January 24, 2018 MM / DD / YYYY	_
24.0		_

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of California, Fresno Division

In 1	re Ybarra, Corina Yvette		Case No.		
		Debtor(s)	Chapter	13	
	DISCLOSURE OF COMPENSATI	ON OF ATTORN	EY FOR I	DEBTOR	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certicompensation paid to me within one year before the filing of the period be rendered on behalf of the debtor(s) in contemplation of or in contemplation.	etition in bankruptcy, or a	greed to be pai	d to me, for services rendered	or to
	□ FLAT FEE				
	For legal services, I have agreed to accept		\$		
	Prior to the filing of this statement I have received		\$		
	Balance Due		\$		
	RETAINER				
	For legal services, I have agreed to accept and received a retain	ner of	\$	2,500.00	
	The undersigned shall bill against the retainer at an hourly rate [Or attach firm hourly rate schedule.] Debtor(s) have agreed t fees and expenses exceeding the amount of the retainer.	e of o pay all Court approved	\$	330.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed compensation w firm.	rith any other person unle	ss they are men	mbers and associates of my lav	7
	☐ I have agreed to share the above-disclosed compensation with copy of the agreement, together with a list of the names of the				. A
5.	In return for the above-disclosed fee, I have agreed to render legal	service for all aspects of	the bankruptcy	case, including:	
	 a. Analysis of the debtor's financial situation, and rendering advices. b. Preparation and filing of any petition, schedules, statement of a condition. c. Representation of the debtor at the meeting of creditors and condition. d. [Other provisions as needed] All other services at \$330 per hour. 	ffairs and plan which may	be required;		
б.	By agreement with the debtor(s), the above-disclosed fee does not Any cost, including but not limited to, any credit financial management course; Converting this case to another chapter;			nseling course or persona	I

This disclosure of compensation does not intend to circumvent Local Bankruptcy Rule 2017-1.

No loan modification representation; and

No asset valuation services.

In re	Ybarra, Corina Yvette	Case No.	
	Debtor(s)	_	

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

	(Continuation Sheet)
	CERTIFICATION
I certify that the foregoing is a complete stateme this bankruptcy proceeding.	ent of any agreement or arrangement for payment to me for representation of the debtor(s) in
January 24, 2018 Date	/s/ Phillip W. Gillet Jr. Phillip W. Gillet Jr. Signature of Attorney Phillip Gillet, Jr. Attorney at Law 1705 27th St Bakersfield, CA 93301-2807 (661) 323-3200 Fax: (661) 323-3078 lawyer@bak.rr.com Name of law firm